Form Approved OMB No. 2050-0039 Expires 9-30-96

100	V	INTEGRM HAZARDOUS VASTE MANIFEST	1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1	The second secon	in the shaded areas red by Federal law.				
	3. Generator's Name and Mailing Address  USEPA DAYTON ELECTROPLATE  1030 VALLEY STREET  DAYTON OHIO 45404  CINCINNATI, OH. 45268  A. State Manifest Document Nu  CINCINNATI, OH. 45268  B. State Generator's ID						Number				
	DAYTO										
	-	tor's Phone (937) 223-6 orter 1 Company Name	6. US EPA ID	Number	C. State Tran	nsporter's ID					
		RESEARCH TRANSPORTATION CD OHDOO4178612 D. Transporter's Phone									
	7. Transpo	orter 2 Company Name	8. US EPA ID		E. State Tran						
	O Design	9. Designated Facility Name and Site Address  10. US EPA ID Number  G. State Facility's ID									
	RESEA 2655										
	CLEVE	ELAND	12	H. Facility's Phone							
	OH 44		(216) 623-8383 htainers 12 14.								
	11. HM	US DOT Description (Including Proper S	hipping Name, Hazard Class, and ID Number	No.			nit /Vol Waste No.				
	a. X	Waste Flammable liquid 3, UN1993, PGII, RG (D				D001					
				001	1 1100	500	G				
G	b.			Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner							
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TO	C.		DECION 5								
R			US EPA RECORDS CENTER REGION 5								
	d.		436248								
	.l Additio	nal Descriptions for Materials Listed Abor	ve		K Handling	Codes for Waste	es Listed Above				
1		OUR EMERGENCY CONTACT		TIME IN:							
				IME OUT:	mo61						
		15. Special Handling Instructions and Additional Information PD# G-51206 REL#  USE GLOVES & GOGGLES; PUMP DRUMS/DRUMPIPE HDSE 40' CONTACT JAY HDDVER 937-223-6765									
	100000000000000000000000000000000000000	ACCEPT # (a): 0023382 H ALL SPILLS MUST BE REPORTED TO THE NATIONAL RESPONSE CENTER AT (800) 424-8802, 24 HOURS PER DAY.									
	16. GENE	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are									
1	classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.										
	future	If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
	Printe	d/Typed Name	Signature	-10-	>		Month Day Year				
	_	STEVEN L. RENN		かん.1	1	_	103124197				
TRA	17. Trans	Date  Month Day Year									
NS	11/1	Pripried/Typed Name  Signature  Signature  The Total									
POR		Transporter 2 Acknowledgement or Receipt of Materials									
RTER	Printe	Printed/Typed Name Signature									
R	19 Discre										
FA		9. Discrepancy Indication Space									
CIL	20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.										
I	ZU. Facilit	y Owner or Operator: Certification of reco	eipt of hazardous materials covered by this	manifest except as	noted in Item	19.					
Y	Printe	d/Typed Name	Signature	21	TO ESCHIPTION TO	montones ann p	Month Day Year				
	14	ne sterger re	OC Muse	e Sten	ea K	OC	103/24/97				
EP	A Form 8	700-22 (Rev. 9-88) Previous editions	are obsolete. GENERATOR		,						

Form Approved OMB No. 2050-0039 Expires 9-30-96

	THE REAL PROPERTY.	WASTE MANIFEST	1. Generator's US EPA ID No.	Manif Docume	nt No.	2. Pag	- Illioinia		ne shaded areas by Federal law				
	3 G	Generator's Name and Mailing Address				A. State	e Manifest Docume	ent Num	ber				
		SEPA DAYTON ELECTROPLATE	U.S.EPA (B-Z)	N	ONE								
		030 VALLEY STREET	26 W.M. LUTHER	KING DIZ	to I The								
		AYYUN, DHIO 45404	CINCINNATI, OH.			B. State	e Generator's ID						
	UF	ATTUN, UNIO 40404	ATTN: E. RENNIN										
	4. G	Generator's Phone ( 937) 223-67	65										
	5. T	ransporter 1 Company Name		C. State	e Transporter's ID								
	RE	ESEARCH TRANSPORTATION CO		D. Transporter's Phone (216) 623-8383									
18	100000	ransporter 2 Company Name		E. State	e Transporter's ID								
							F. Transporter's Phone						
	9. D	Designated Facility Name and Site Address		G. Stat	e Facility's ID								
	RE	ESEARCH DIL CO.											
	1000	655 TRAMSPORT RD.		H. Facility's Phone									
	The second	LEVELAND		(216)623-8393									
	. (3)	H 44115	DED004178		12. Conta								
		11. US DOT Description (Including Proper Sh	ipping Name, Hazard Class, and ID Num	nber)	No.	Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.				
	a.	Waste Flannable liquid.	n.n.s. (Aleshed) < 2			F 19			D001				
		3. UN1993, PG11, RG (DO											
			12. 2. 2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		001	TT	-	. 6					
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	J. Additional Descriptions for Materials Listed Above  K. Handling Codes for Wa								sted Above				
	24 HOUR EMERGENCY CONTACT # 1-800-969-9252 ERG#128  TIME OUT:  15. Special Handling Instructions and Additional Information PD# 6-51206 REL#												
	U	SE GLOVES & GOGGLES: PUMP	DRUMS/DRUMPIPE HUSE 4	O CUNTA	IET di	AY HI	JUVER 937-	223-	5765				
	ACCEPT # (a): 0023382 H												
	1000	ALL SPILLS MUST BE REPORTED TO THE N	ATIONAL RESPONSE CENTER AT (800	) 424-8802, 24	HOURS	PERC	DAY.		100				
18	16	GENERATOR'S CERTIFICATION: I hereby dec	lare that the contents of this consignmen	at are fully and	accurate	alv dosc	ribad above by pre	oper chi	oning name and are				
	1 10	classified, packed, marked, and labeled, and are regulations.	in all respects in proper condition for trans	sport by highwa	ay accord	ing to ap	oplicable internation	nal and	national government				
		If I am a large quantity generator, I certify that I	have a program in place to reduce the v	olume and tox	icity of w	aste ge	nerated to the deg	ree I ha	ve determined to be				
		economically practicable and that I have selecte future threat to human health and the environment has best waste management method that is sue	ent; OR, if I am a small quantity generator	r, I have made	a good f	aith effo	ort to minimize my	waste g	eneration and select				
		the best waste management method that is ava	the state of the s		200	EXILES.			Month Day V				
		Printed/Typed Name  STEVEN L. RENN	Signature	STAF	10				Month Day Year				
T	17.	Transporter 1 Ackonwledgement or Receipt of M		1					Date				
RA		Printed/Typed Name	Signature	1	)			THE PERSON	Month Day Year				
ANSP	1	Mire Thisto While Itak							12312497				
0	18.	8. Transporter 2 Acknowledgement or Receipt of Materials							Date				
RT		Printed/Typed Name			Call Care Indian		Month Day Year						
R													
	19.	Discrepancy Indication Space		WAY SERVICE	SHORE			19-5-1					
F													
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1 1													
1	20.	Facility Owner or Operator: Certification of recei	pt of hazardous materials covered by th	is manifest ex	cept as r	oted in	Item 19.		THE REAL PROPERTY.				
Y	0.01	Printed/Typed Name	To muyes of denerators, 15 minutes for	BOATONE OF DA	ISOLUZIO Z	nullean	total to noncellos e	WI COLD	Date				
	91	m. Send comments regarding the burden estimate	Signature					This in	Month Day Year				
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Research Transportation Company  7. Transporter 2 Company Name  9. Designated Facility Name and Site Address  Research Oil Company 2655 Transport Road Cleveland, OH 44115  11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID HM  a. X Waste Flammable Liquid, n.o.s., (Isopropal Alcohol), 3,UN1993, PGII, RQ(D001)	2 8   5   6 3   3   6   1   18	er's ID none (216) 623-8383 er's ID none ID 14. Unit							
ATTN: Jay Hoover  4. Generator's Phone (937) 223-6765  5. Transporter 1 Company Name  Research Transportation Company  7. Transporter 2 Company Name  9. Designated Facility Name and Site Address  Research Oil Company  2655 Transport Road  Cleveland, OH 44115  11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID HM  a. X Waste Flammable Liquid, n.o.s.,  (Isopropal Alcohol),  3.UN1993, PGII, RQ(D001)	B. State Generator  C. State Transporter  L. Transporter's P.  D. Transporter's P.  E. State Transporter's P.  E. State Transporter's P.  G. State Facility's  H. Facility's Phone  (216)623-  Number)  12. Containers  No. Type Total Qua	er's ID none (216) 623-8383 er's ID none ID							
4. Generator's Phone (937) 223-6765  5. Transporter 1 Company Name  Research Transportation Company  7. Transporter 2 Company Name  9. Designated Facility Name and Site Address  Research Oil Company  2655 Transport Road  Cleveland, OH 44115  OHDOO  11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID HM  a. X Waste Flammable Liquid, n.o.s.,  (Isopropal Alcohol),  3.UN1993, PGII, RQ(D001)	4 1 7 8 6 1 2 D. Transporter's P. E. State Transporter's P. F. Transporter's P. P. A. ID Number G. State Facility's H. Facility's Phone 4 1 7 8 6 1 2 (216)623-Number) 12. Containers 13. No. Type Total Qua	none (216) 623-8383 er's ID none ID							
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J. Additional Descriptions for Materials Listed Above  11a) 23382–15	K. Handling Codes	K. Handling Codes for Wastes Listed Above							
114) 25502 17	mo61	mo61							
15. Special Handling Instructions and Additional Information									
EMERGENCY RESPONSE # 1-800-969-9252									
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Printed/Typed Name STEVEN L. RENNINGER Signature	SERR	Month Day Ye							
17. Transporter 1 Ackonwledgement or Receipt of Materials Printed/Typed Name Signature		Month Day Ye							
JOSEPH STEPKA 4	siph Stoka	10310419							
18. Transporter 2 Acknowledgement or Receipt of Materials  Printed/Typed Name  Signature		Date  Month Day Ye.							
19. Discrepancy Indication Space		4							
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered l	by this manifest except as noted in Item 19.	Date							
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	A'	TIN: Jay Hoover		B. State Generator's ID							
	-	Generator's Phone ( 037 ) 223-6  Transporter 1 Company Name	6.	US EPA ID Number	C. State Transporter's ID						
	13.00	esearch Transportation Co	mpany h II	0004178	612	The second second		s Phone (	216)	523-83	383
		ransporter 2 Company Name	US EPA ID Number	E. State Transporter's ID							
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	9. Designated Facility Name and Site Address 10. US EPA ID Number  G. State Facility's ID  Research Oil Company 2655 Transport Road										
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1		11a) 23302-17									
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		Printed/Typed Name STEVEN L. RENN	INGER	Signature	FIR	AND THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN				Month	Day Yea
T	17.	Transporter 1 Ackonwledgement or Receipt of				V					Date
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SP		Transporter 2 Acknowledgement or Receipt of	of Materials	Joseph	St	ple	0			031	149
ORTE		Printed/Typed Name Signature						Date Day Yea			
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LIT	20.	Facility Owner or Operator: Certification of re	eceipt of hazardous material	s covered by this manifest	except as	noted in	Item 19	).	High		Doto
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